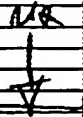


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Substitute for form 1449A/PTO		<b>Complete if Known</b>	
<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  <i>(use as many sheets as necessary)</i>		Application Number	
		Filing Date	March 9, 2004
		First Named Inventor	Craig L. Schimmel
		Art Unit	Unknown
		Examiner Name	Not Yet Assigned
Sheet 1	of 1	Attorney Docket Number	H0006457-1626

U.S. PATENT DOCUMENTS					
Examiner Initials	Cite No. <sup>1</sup>	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number- Kind Code <sup>2</sup> (if known)			
		US-4,823,287	04-18-1989	Thompson	---
		US-5,519,821	05-21-1996	Schauer et al.	---
		US-6,236,753 B1	05-22-2001	Inamoto	---
		US-6,320,984 B1	11-20-2001	Shigeta	---
		US-			
		US-			
		US-			
		US-			
		US-			
		US-			

FOREIGN PATENT DOCUMENTS						
Examiner Initials	Cite No. <sup>1</sup>	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>2</sup>
		Country Code <sup>3</sup> , Number <sup>4</sup> , Kind Code <sup>5</sup> (if known)				
						<input type="checkbox"/>
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Examiner Signature		Date Considered	
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OTHER PRIOR ART -- NON PATENT LITERATURE DOCUMENTS			
Examiner Initials	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>
			<input type="checkbox"/>
			<input type="checkbox"/>

Examiner Signature		Date Considered	2/14/05
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<sup>1</sup> EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with said communication to applicant.  
<sup>2</sup> Applicant's unique citation designation number (optional). <sup>3</sup> Applicant is to place a check mark here if English language Translation is attached.

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